

Property Address: 1222 Desoto

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails B
 2. Basement/cellar floor M
 3. Foundation M
 4. Evidence of dampness or staining Y
 5. First floor, floor system M
 6. Beams and columns M

1. *B Ends of handrail are not returned*
 4. *Previous minor stains on unfinished walls and under steps on drywall there is discoloration*

ELECTRICAL SERVICE(S) # of Services 1

7. Service size:
 Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____
 Volts: 115 ____ 115/220 X

8. *H No electrical grounding loop at water meter. Service ground is connected to street side of water meter only.*

BASEMENT ONLY:

8. Electrical service installation/grounding H
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) M
 11. Waste and vent piping (all floors) M
 12. Water piping (all floors) M
 13. Gas piping (all floors) M
 14. Water heater(s), installation B
 15. Water heater(s), venting B
 16. Plumbing fixtures (basement) M

14. *B Corrosion at burner door*
 15. *B Vent pipe connects with a 90 degree angle vs 45 to furnace exhaust, corrosion at joints*

HEATING SYSTEM(S) # of 1

17. Heating plant(s): Type: Air Fuel: Gas
 a. Installation and visible condition C, B
 b. Viewed in operation (required in heating season) Y
 c. Combustion venting M

- 17A *B Debris in burner area*
 17A *C Heat exchanger and interior components are not visible.*

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: _____ Fuel: _____
 a. Installation and visible condition -
 b. Viewed in operation -
 c. Combustion venting -

19. ADDITIONAL COMMENTS (1 through 18) -

EVALUATOR: Scott ScheunemannDATE: 01/09/2007Page 2 of 4
Rev 1/2004

PHA 018459

3. Smoke detector Information:

Smoke detector(s) Y
 Properly located Y
 Hard-Wired Y

Disclosure Report**St. Paul Truth-In-Sale of Housing**

(Carefully read this entire report)

For Office Use, ONLY:

Date Received _____

Payment Ref: _____

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 550 Robert St S

Addresses without the correct street type and/or direction may be returned and may incur a late fee.

Owner's Name: Public Housing AgencyOwner's Address: 555 N Wabasha St #400, St. Paul, MN 55102

include City & State if NOT St. Paul, and ALL Zip codes, EVEN IN St. Paul

Type of Dwelling: Single Family X Townhouse _____ Condo* _____
 Duplex _____ Usage may not be legal. See below.

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

Comments:

PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul. You may obtain a printout of all this information by visiting the LIEP website at: www.liep.us

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

- ☐ IS located within a St. Paul Heritage Preservation District or it is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation contact the Office of License, Inspections and Environmental Protection (LIEP) at 651. 266-9090.
- ☐ IS a Registered Vacant Building Vacant Buildings are regulated by Chapter 43 of the St. Paul Legislative Code. New owners must re-register the building and must comply with all existing Code Compliance Orders. Other regulation or restrictions regarding occupancy may apply. Contact the Vacant Buildings Division for specific information at 651. 266-1900.
- ☐ HAS Open permits. Completion and/or occupancy restrictions or requirements may apply. Contact LIEP at 651.266-9090.
- ☐ IS a Verified Legal Duplex. If this dwelling is in use is a duplex and this box is not checked, contact LIEP Zoning at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

RATING

"M" = Meets minimum standards - the item conforms to minimum standards of maintenance

KEY:

"B" = Below minimum standards - the item is below minimum standards

"C" = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards

"H" = Hazardous - the item in its present condition may endanger the health and safety of the occupant

Any item marked "B", "C", or "H" must have a written comment about the item. Additional comment sheets may be attached if needed.

"Y" = Yes "N" = No "NV" = Not Visible/Viewed

"NA" = Not Applicable

This Report:

- is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detector in single family residences.
- is based on the current Truth-in-Sale of Housing Evaluator Guidelines.
- is not warranted, by the City of St. Paul, or by the evaluator, for the condition of the building component, nor of the accuracy of this report.
- covers only the items listed on the form and only those items *visible at the time of the evaluation*. The Evaluator is not required to ignite the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
- may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
- is valid for one year from the date of issue and only for the owner named on this report.

Questions regarding this report should be directed to the evaluator.

Complaints regarding this report should be directed to Department of Neighborhood Housing and Property Improvement,
 Truth-in-Sale of Housing, 1600 White Bear Ave North, St. Paul, MN 55106, Phone No. (651) 266-1900.

EVALUATOR: Scott Scheunemann PHONE: 651-646-0009 DATE: 01/09/2007 Rev 1/2004Address 550 ROBERT ST SDate 01 / 09 / 2007

page 1 of

4

PHA 018460

Property Address: 550 Robert St S

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails B
 2. Basement/cellar floor M
 3. Foundation M
 4. Evidence of dampness or staining Y
 5. First floor, floor system M
 6. Beams and columns M

1. *B Low headroom and guardrail, lacking round handrail with returned ends*
 4. *Previous stains on unfinished walls and at laundry*

ELECTRICAL SERVICE(S) # of Services . 1

7. Service size:

Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____Volts: 115 ____ 115/220 X**BASEMENT ONLY:**

8. Electrical service installation/grounding M
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) B
 11. Waste and vent piping (all floors) M
 12. Water piping (all floors) B
 13. Gas piping (all floors) B
 14. Water heater(s), installation M
 15. Water heater(s), venting B
 16. Plumbing fixtures (basement) M

10. *B Debris in drain- potentially clogged*
 12. *B No backflow prevention on exterior water faucets.*
 13. *B Obsolete gas valve installed for water heater*
 15. *B Lacking screws for vent joints. Water heater is not visibly connected to a metal chimney liner*

HEATING SYSTEM(S) # of 1

17. Heating plant(s): Type: Air Fuel: Gas
 a. Installation and visible condition C
 b. Viewed in operation(required in heating season) ... Y
 c. Combustion venting M

- 17A *C Heat exchanger and interior components are not visible.*

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: ____ Fuel: ____
 a. Installation and visible condition ____
 b. Viewed in operation ____
 c. Combustion venting ____

19. ADDITIONAL COMMENTS (1 through 18) ____

EVALUATOR: Scott ScheunemannDATE: 01/09/2007Page 2 of 4
Rev 1/2004

PHA 018461

39. Smoke detector Information:

Smoke detector(s) Y
 Properly located Y
 Hard-Wired Y

Disclosure Report

St. Paul Truth-In-Sale of Housing
 (Carefully read this entire report)

For Office Use, ONLY:

Date Received _____
 Payment Ref: _____

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 1032 Otto Ave

Addresses without the correct street type and/or direction may be returned and may incur a late fee.

Owner's Name: Public Housing Agency, City of St PaulOwner's Address: 261 University Ave E, St. Paul, MN 55103

include City & State if NOT St. Paul, and ALL Zip codes, EVEN IN St. Paul

Type of Dwelling: Single Family X Townhouse _____ Condo* _____
 Duplex _____ Usage may not be legal. See below.

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

Comments:

PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul. You may obtain a printout of all this information by visiting the LIEP website at: www.liep.us

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

- ☐ IS located within a St. Paul Heritage Preservation District or it is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation contact the Office of License, Inspections and Environmental Protection (LIEP) at 651. 266-9090.
- ☐ IS a Registered Vacant Building Vacant Buildings are regulated by Chapter 43 of the St. Paul Legislative Code. New owners must re-register the building and must comply with all existing Code Compliance Orders. Other regulation or restrictions regarding occupancy may apply. Contact the Vacant Buildings Division for specific information at 651. 266-1900.
- ☐ HAS Open permits. Completion and/or occupancy restrictions or requirements may apply. Contact LIEP at 651.266-9090.
- ☐ IS a Verified Legal Duplex. If this dwelling is in use is a duplex and this box is not checked, contact LIEP Zoning at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

RATING**KEY:**

"M" = Meets minimum standards - the item conforms to minimum standards of maintenance

"B" = Below minimum standards - the item is below minimum standards

"C" = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards

"H" = Hazardous - the item in its present condition may endanger the health and safety of the occupant

Any item marked "B", "C", or "H" must have a written comment about the item. Additional comment sheets may be attached if needed.

"Y" = Yes "N" = No "NV" = Not Visible/Viewed

"NA" = Not Applicable

This Report:

- is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detector in single family residences.
- is based on the current Truth-in-Sale of Housing Evaluator Guidelines.
- is not warranted, by the City of St. Paul, or by the evaluator, for the condition of the building component, nor of the accuracy of this report.
- covers only the items listed on the form and only those items *visible at the time of the evaluation*. The Evaluator is not required to ignite the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
- may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
- is valid for one year from the date of issue and only for the owner named on this report.

Questions regarding this report should be directed to the evaluator.

Complaints regarding this report should be directed to Department of Neighborhood Housing and Property Improvement,
 Truth-in-Sale of Housing, 1600 White Bear Ave North, St. Paul, MN 55106, Phone No. (651) 266-1900.

EVALUATOR: Vicki Scheunemann PHONE: 651-646-0009 DATE: 01/10/2007 Rev 1/2004

Address 1032 OTTO AVE

Date 01 / 10 / 2007

Page 1 of 4

4

PHA 018462

Property Address: 1032 Otto Ave

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails B
 2. Basement/cellar floor B
 3. Foundation B
 4. Evidence of dampness or staining Y
 5. First floor, floor system M
 6. Beams and columns M

1. *B Low headroom (less than 6' 8")*
 2. *B Rough floor*
 3. *B Some cracks in plaster covering*
 4. *Previous stains on unfinished walls.*

ELECTRICAL SERVICE(S) # of Services . 1

7. Service size:

Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____Volts: 115 ____ 115/220 X**BASEMENT ONLY:**

8. Electrical service installation/grounding M
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) M
 11. Waste and vent piping (all floors) M
 12. Water piping (all floors) M
 13. Gas piping (all floors) M
 14. Water heater(s), installation M
 15. Water heater(s), venting M
 16. Plumbing fixtures (basement) M

HEATING SYSTEM(S) # of 1

17. Heating plant(s): Type: Water Fuel: Gas
 a. Installation and visible condition C
 b. Viewed in operation (required in heating season) ... Y
 c. Combustion venting M

17A C RPZ valve in place, no maintenance tag
visible

The Evaluator is not required to ignite the heating plant(s), except
during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: ____ Fuel: ____
 a. Installation and visible condition -
 b. Viewed in operation -
 c. Combustion venting -

19. ADDITIONAL COMMENTS (1 through 18) -EVALUATOR: Vicki Scheunemann DATE: 01/10/2007Page 2 of 4
Rev 1/2004

PHA 018463

39. Smoke detector Information:

Smoke detector(s) Y
 Properly located Y
 Hard-Wired Y

Disclosure Report**St. Paul Truth-In-Sale of Housing**

(Carefully read this entire report)

For Office Use, ONLY:

Date Received _____

Payment Ref: _____

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 1673 Lafond Ave

Addresses without the correct street type and/or direction may be returned and may incur a late fee.

Owner's Name: Public Housing Agency, City of St PaulOwner's Address: 261 University Ave E, St. Paul, MN 55103

include City & State if NOT St Paul, and ALL Zip codes, EVEN IN St Paul

Type of Dwelling: Single Family X Townhouse _____ Condo* _____
 Duplex _____ Usage may not be legal. See below.

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

Comments:

PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul. You may obtain a printout of all this information by visiting the LIEP website at: www.liep.us

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

- ☐ IS located within a St. Paul Heritage Preservation District or it is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation contact the Office of License, Inspections and Environmental Protection (LIEP) at 651. 266-9090.
- ☐ IS a Registered Vacant Building. Vacant Buildings are regulated by Chapter 43 of the St. Paul Legislative Code. New owners must re-register the building and must comply with all existing Code Compliance Orders. Other regulation or restrictions regarding occupancy may apply. Contact the Vacant Buildings Division for specific information at 651. 266-1900.
- ☐ HAS Open permits. Completion and/or occupancy restrictions or requirements may apply. Contact LIEP at 651.266-9090.
- ☐ IS a Verified Legal Duplex. If this dwelling is in use is a duplex and this box is not checked, contact LIEP Zoning at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

RATING**KEY:**

"M" = Meets minimum standards - the item conforms to minimum standards of maintenance

"B" = Below minimum standards - the item is below minimum standards

"C" = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards

"H" = Hazardous - the item in its present condition may endanger the health and safety of the occupant

Any item marked "B", "C", or "H" must have a written comment about the item. Additional comment sheets may be attached if needed.

"Y" = Yes "N" = No "NV" = Not Visible/Viewed

"NA" = Not Applicable

This Report:

- is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detector in single family residences.
- is based on the current Truth-in-Sale of Housing Evaluator Guidelines.
- is not warranted, by the City of St. Paul, or by the evaluator, for the condition of the building component, nor of the accuracy of this report.
- covers only the items listed on the form and only those items *visible at the time of the evaluation*. The Evaluator is not required to ignite the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
- may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
- is valid for one year from the date of issue and only for the owner named on this report.

Questions regarding this report should be directed to the evaluator.

Complaints regarding this report should be directed to Department of Neighborhood Housing and Property Improvement,
 Truth-in-Sale of Housing, 1600 White Bear Ave North, St. Paul, MN 55106, Phone No. (651) 266-1900.

EVALUATOR: Vicki Scheunemann PHONE: 651-646-0009 DATE: 01/09/2007 Rev 1/2004Address 1673 LAFOND AVEDate 01 / 09 / 2007page 1 of 4

PHA 018464

Property Address: 1673 Lafond Ave

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails M
 2. Basement/cellar floor M
 3. Foundation M
 4. Evidence of dampness or staining N
 5. First floor, floor system M
 6. Beams and columns M

ELECTRICAL SERVICE(S) # of Services . 1

7. Service size:
 Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____
 Volts: 115 ____ 115/220 X

8. *H Service ground is connected to street side of water meter only. No electrical grounding loop at meter*

BASEMENT ONLY:

8. Electrical service installation/grounding H
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) M
 11. Waste and vent piping (all floors) B
 12. Water piping (all floors) B
 13. Gas piping (all floors) B
 14. Water heater(s), installation M
 15. Water heater(s), venting M
 16. Plumbing fixtures (basement) M

11. *B Some corrosion cast iron waste line*
 12. *B No backflow prevention on exterior water faucets.*
 13. *B Lacking drip-T fitting for dryer.*

HEATING SYSTEM(S) # of 1

17. Heating plant(s): Type: Water Fuel: Gas
 a. Installation and visible condition H
 b. Viewed in operation (required in heating season) ... Y
 c. Combustion venting M

17A *H No backflow preventer on boiler water supply (DCIVA)*

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: ____ Fuel: ____
 a. Installation and visible condition -
 b. Viewed in operation -
 c. Combustion venting -

19. ADDITIONAL COMMENTS (1 through 18) -

EVALUATOR: Vicki ScheunemannDATE: 01/09/2007

Page 2 of 4
 Rev 1/2004

PHA 018465

Property Address: 1673 Lafond AveSee Page 1 for Rating Key **Item #** **Comments**

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

KITCHEN

20. Walls and ceiling	<u>M</u>
21. Floor condition and ceiling height	<u>M</u>
22. Evidence of dampness or staining	<u>N</u>
23. Electrical outlets and fixtures	<u>M</u>
24. Plumbing fixtures	<u>M</u>
25. Water flow	<u>B</u>
26. Window size/openable area/mechanical exhaust	<u>M</u>
27. Condition of doors/windows/mech. exhaust	<u>M</u>

25. *B Water flow below minimal requirements. No flow when other fixtures running.***LIVING AND DINING ROOM(S)**

28. Walls and ceiling	<u>M</u>
29. Floor condition and ceiling height	<u>M</u>
30. Evidence of dampness or staining	<u>N</u>
31. Electrical outlets and fixtures	<u>M</u>
32. Window size and openable area	<u>M</u>
33. Window and door condition	<u>M</u>

HALLWAYS, STAIRS AND ENTRIES

34. Walls, ceilings and floors	<u>M</u>
35. Evidence of dampness or staining	<u>N</u>
36. Stairs and handrails to upper floors	<u>M</u>
37. Electrical outlets and fixtures	<u>M</u>
38. Window and door condition	<u>M</u>
39. Smoke detector(s)	<u>Y</u>
Properly located	<u>Y</u>
Hard-wired	<u>Y</u>

BATHROOM(S)

40. Walls and ceiling	<u>M</u>
41. Floor condition and ceiling height	<u>M</u>
42. Evidence of dampness or staining	<u>N</u>
43. Electrical outlets and fixtures	<u>M</u>
44. Plumbing fixtures	<u>B</u>
45. Water flow	<u>B</u>
46. Window size/openable area/mechanical exhaust	<u>M</u>
47. Condition of windows/doors/mech. exhaust	<u>M</u>

44. *B Corrosion on wasteline bathroom sink.*45. *B Below minimal water flow. Tub runs at less than pencil diameter. When tub faucet running there is no water flow to bathroom or kitchen sink.***SLEEPING ROOM(S)**

48. Walls and ceiling	<u>M</u>
49. Floor condition, area, and ceiling height	<u>M</u>
50. Evidence of dampness or staining	<u>N</u>
51. Electrical outlets and fixtures	<u>H</u>
52. Window size and openable area	<u>M</u>
53. Window and door condition	<u>M</u>

51. *H Ungrounded 3 prong outlets.***ENCLOSED PORCHES AND OTHER ROOMS**

54. Walls and floor condition	<u> </u>
55. Evidence of dampness or staining	<u> </u>
56. Electrical outlets and fixtures	<u> </u>
57. Window and door condition	<u> </u>

ATTIC SPACE (Visible Areas)

58. Roof boards and rafters	<u>C</u>
59. Evidence of dampness or staining	<u> </u>
60. Electrical wiring/outlets/fixtures	<u> </u>
61. Ventilation	<u> </u>

58. , 59, 60, 61 *Not accessed closet stored items /clothes / shelf in way of access*62. **ADDITIONAL COMMENTS (20 through 61)** -EVALUATOR: Vicki ScheunemannDATE: 01/09/2007Page 3 of 4
Rev 1/2004

PHA 018466

Property Address: 1673 Lafond Ave

See Page 1 for Rating Key

Item # Comments

EXTERIOR (Visible Areas)

63. Foundation	<u>B</u>
64. Basement/cellar windows	<u>M</u>
65. Drainage (grade)	<u>B</u>
66. Exterior walls	<u>B</u>
67. Doors (frames/storms/screens)	<u>M</u>
68. Windows (frames/storms/screens)	<u>M</u>
69. Open porches, stairways and decks	<u>M</u>
70. Cornice and trim	<u>M</u>
71. Roof structure and covering	<u>M</u>
72. Gutters and downspouts	<u>M</u>
73. Chimneys	<u>M</u>
74. Outlets, fixtures and service entrance	<u>M</u>

63. *B Peeling paint.*
 65. *B Grade is low / flat in areas.*
 66. *B Stucco cracked. Peeling areas on porch.*

GARAGE(S)/ACCESSORY STRUCTURE(S)

75. Roof structure and covering	<u>M</u>
76. Wall structure and covering	<u>B</u>
77. Slab condition	<u>C</u>
78. Garage doors	<u>M</u>
79. Garage opener- (see important notice #6)	<u>N</u>
80. Electrical wiring, outlets and fixtures	<u>C</u>
81. ADDITIONAL COMMENTS (62 through 80)	_____

76. *B Peeling paint*
 77. *C Limited view due to stored goods.*
 80. *C No power to garage. Remnants of old knob & tube remain.*

FIREPLACE/WOODSTOVES # of

82. Dampers installed in fireplaces	<u>C</u>
83. Installation	_____
84. Condition	_____

82. *C Fireplace not viewed, furniture in front of unit*

SUPPLEMENTAL INFORMATION No determination is made whether items meet minimum standards (Y/N, NA, NV, only)

INSULATION	Y/N	Type	Inches/Depth
85. Attic Insulation	<u>NV</u>	_____	_____
86. Foundation Insulation	<u>N</u>	_____	_____
87. Kneewall Insulation	<u>NA</u>	_____	_____
88. Rim Joist Insulation	<u>NA</u>	_____	_____

89. ADDITIONAL COMMENTS (81 through 88) _____

I hereby certify I prepared this report in compliance with the St. Paul Evaluator Guidelines and all other applicable policies and procedures of the Truth-in-Sale of Housing Board. I have utilized reasonable and ordinary care and diligence and I have noted all conditions found that do not conform to the minimum standards of maintenance.

Vicki Scheunemann

Evaluator Signature

651-646-0009

Phone Number

01/09/2007

Date

Page 4 of 4

Rev 1/2004

Printed Name: Vicki Scheunemann

IMPORTANT NOTICES

- Any single family residence in St. Paul must have at least one smoke detector connected to the electrical system (hard-wired). The detector must be located near sleeping rooms. For more information call Fire Prevention, (651) 228-6230. (St. Paul Legislative Code, Chapter 58.)
- Rainleaders connected to the sanitary sewer system must be disconnected. For more information call Public Works, Sewer Division, (651) 266-6234.
- Any house built before 1950 may have lead paint on/in it. If children eat lead paint, they can be poisoned. For more information call Ramsey County Public Health, (651) 292-6525.
- Neither the City of St. Paul nor the Evaluator is responsible for the determination of the presence of airborne particles such as asbestos, noxious gases such as radon, or other conditions of air quality that may be present, nor the conditions which may cause the above.
- If this building is used for any purpose other than a single family dwelling, it may be illegally zoned. To help you determine legal uses under the zoning ordinance, contact the Zoning Administrator at (651) 266-9008.
- An automatic garage door should reverse upon striking an object. If it does not reverse it poses a serious hazard and should be immediately repaired or replaced.

PHA 018467

39. Smoke detector Information:

Smoke detector(s) Y
 Properly located Y
 Hard-Wired Y

Disclosure Report

St. Paul Truth-In-Sale of Housing

(Carefully read this entire report)

For Office Use, ONLY:

Date Received _____

Payment Ref: _____

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 1012 Ashland Ave

Addresses without the correct street type and/or direction may be returned and may incur a late fee.

Owner's Name: Public Housing Agency, City of St PaulOwner's Address: 261 University Ave E, St. Paul, MN 55103

include City & State if NOT St. Paul, and ALL Zip codes, EVEN IN St. Paul

Type of Dwelling: Single Family X Townhouse _____ Condo* _____
 Duplex _____ Usage may not be legal. See below.

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

Comments:

PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul. You may obtain a printout of all this information by visiting the LIEP website at: www.liep.us

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

- ☐ IS located within a St. Paul Heritage Preservation District or it is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation contact the Office of License, Inspections and Environmental Protection (LIEP) at 651. 266-9090.
- ☐ IS a Registered Vacant Building. Vacant Buildings are regulated by Chapter 43 of the St. Paul Legislative Code. New owners must re-register the building and must comply with all existing Code Compliance Orders. Other regulation or restrictions regarding occupancy may apply. Contact the Vacant Buildings Division for specific information at 651. 266-1900.
- ☐ HAS Open permits. Completion and/or occupancy restrictions or requirements may apply. Contact LIEP at 651.266-9090.
- ☐ IS a Verified Legal Duplex. If this dwelling is in use is a duplex and this box is not checked, contact LIEP Zoning at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

RATING

KEY:

"M" = Meets minimum standards - the item conforms to minimum standards of maintenance

"B" = Below minimum standards - the item is below minimum standards

"C" = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards

"H" = Hazardous - the item in its present condition may endanger the health and safety of the occupant

Any item marked "B", "C", or "H" must have a written comment about the item. Additional comment sheets may be attached if needed.

"Y" = Yes "N" = No "NV" = Not Visible/Viewed

"NA" = Not Applicable

This Report:

- is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detector in single family residences.
- is based on the current Truth-in-Sale of Housing Evaluator Guidelines
- is not warranted, by the City of St. Paul, or by the evaluator, for the condition of the building component, nor of the accuracy of this report
- covers only the items listed on the form and only those items *visible at the time of the evaluation*. The Evaluator is not required to ignite the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
- may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
- is valid for one year from the date of issue and only for the owner named on this report

Questions regarding this report should be directed to the evaluator.

Complaints regarding this report should be directed to Department of Neighborhood Housing and Property Improvement,
 Truth-in-Sale of Housing, 1600 White Bear Ave North, St. Paul, MN 55106, Phone No. (651) 266-1900.

EVALUATOR: Vicki Scheunemann PHONE: 651-646-0009 DATE: 01/10/2007 Rev 1/2004

Address 1012 ASHLAND AVE

Date 01/10/2007

Page 1 of 4

4

PHA 018468

Property Address: 1012 Ashland Ave

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails B
 2. Basement/cellar floor M
 3. Foundation M
 4. Evidence of dampness or staining N
 5. First floor, floor system M
 6. Beams and columns M

1. *B Low headroom (less than 6' 8"). Openings in guardrail wider than 4 inches.*

ELECTRICAL SERVICE(S) # of Services . 1

7. Service size:
 Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____
 Volts: 115 ____ 115/220 X

8. *H No electrical grounding loop at water meter.*

BASEMENT ONLY:

8. Electrical service installation/grounding H
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) M
 11. Waste and vent piping (all floors) M
 12. Water piping (all floors) M
 13. Gas piping (all floors) B
 14. Water heater(s), installation B
 15. Water heater(s), venting B
 16. Plumbing fixtures (basement) M

13. *B White plastic used as dryer vent*
 14. *B Stains, discoloration above burner compartment.*
 15. *B Vent lacks proper slope*

HEATING SYSTEM(S) # of 1

17. Heating plant(s): Type: Water Fuel: Gas
 a. Installation and visible condition M
 b. Viewed in operation (required in heating season) ... Y
 c. Combustion venting M

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: ____ Fuel: ____
 a. Installation and visible condition -
 b. Viewed in operation -
 c. Combustion venting -

19. ADDITIONAL COMMENTS (1 through 18) -

EVALUATOR: Vicki ScheunemannDATE: 01/10/2007Page 2 of 4
Rev 1/2004

PHA 018469

Property Address: 1012 Ashland Ave

See Page 1 for Rating Key Item # Comments

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

KITCHEN

20. Walls and ceiling	<u>M</u>
21. Floor condition and ceiling height	<u>M</u>
22. Evidence of dampness or staining	<u>N</u>
23. Electrical outlets and fixtures	<u>M</u>
24. Plumbing fixtures	<u>M</u>
25. Water flow	<u>M</u>
26. Window size/openable area/mechanical exhaust	<u>M</u>
27. Condition of doors/windows/mech. exhaust	<u>M</u>

LIVING AND DINING ROOM(S)

28. Walls and ceiling	<u>M</u>
29. Floor condition and ceiling height	<u>M</u>
30. Evidence of dampness or staining	<u>N</u>
31. Electrical outlets and fixtures	<u>M</u>
32. Window size and openable area	<u>M</u>
33. Window and door condition	<u>M</u>

HALLWAYS, STAIRS AND ENTRIES

34. Walls, ceilings and floors	<u>M</u>
35. Evidence of dampness or staining	<u>N</u>
36. Stairs and handrails to upper floors	<u>M</u>
37. Electrical outlets and fixtures	<u>M</u>
38. Window and door condition	<u>M</u>
39. Smoke detector(s)	<u>Y</u>
Properly located	<u>Y</u>
Hard-wired	<u>Y</u>

BATHROOM(S)

40. Walls and ceiling	<u>M</u>
41. Floor condition and ceiling height	<u>M</u>
42. Evidence of dampness or staining	<u>N</u>
43. Electrical outlets and fixtures	<u>M</u>
44. Plumbing fixtures	<u>M</u>
45. Water flow	<u>M</u>
46. Window size/openable area/mechanical exhaust	<u>M</u>
47. Condition of windows/doors/mech. exhaust	<u>M</u>

SLEEPING ROOM(S)

48. Walls and ceiling	<u>M</u>
49. Floor condition, area, and ceiling height	<u>M</u>
50. Evidence of dampness or staining	<u>N</u>
51. Electrical outlets and fixtures	<u>M</u>
52. Window size and openable area	<u>M</u>
53. Window and door condition	<u>M</u>

ENCLOSED PORCHES AND OTHER ROOMS

54. Walls and floor condition	<u> </u>
55. Evidence of dampness or staining	<u> </u>
56. Electrical outlets and fixtures	<u> </u>
57. Window and door condition	<u> </u>

ATTIC SPACE (Visible Areas)

58. Roof boards and rafters	<u>C</u>
59. Evidence of dampness or staining	<u> </u>
60. Electrical wiring/outlets/fixtures	<u> </u>
61. Ventilation	<u> </u>

58. C Attic entrance sealed, not viewed

62. ADDITIONAL COMMENTS (20 through 61) -EVALUATOR: Vicki ScheunemannDATE: 01/10/2007Page 3 of 4
Rev 1/2004

PHA 018470

Property Address: 1012 Ashland Ave

See Page 1 for Rating Key

Item # Comments

EXTERIOR (Visible Areas)

63. Foundation	<u>M</u>
64. Basement/cellar windows	<u>M</u>
65. Drainage (grade)	<u>M</u>
66. Exterior walls	<u>B</u>
67. Doors (frames/storms/screens)	<u>H</u>
68. Windows (frames/storms/screens)	<u>M</u>
69. Open porches, stairways and decks	<u>B</u>
70. Cornice and trim	<u>M</u>
71. Roof structure and covering	<u>M</u>
72. Gutters and downspouts	<u>M</u>
73. Chimneys	<u>M</u>
74. Outlets, fixtures and service entrance	<u>M</u>

66. *B Some stucco cracks*
 67. *H Broken / jagged glass rear porch door.*
 69. *B High risers, no handrail front steps.*
Cracks on interior of front porch

GARAGE(S)/ACCESSORY STRUCTURE(S)

75. Roof structure and covering	_____
76. Wall structure and covering	_____
77. Slab condition	_____
78. Garage doors	_____
79. Garage opener- (see important notice #6)	_____
80. Electrical wiring, outlets and fixtures	_____
81. ADDITIONAL COMMENTS (62 through 80)	_____

FIREPLACE/WOODSTOVES # of 1

82. Dampers installed in fireplaces	<u>C</u>
83. Installation	_____
84. Condition	_____

82. *C Fireplace sealed*

SUPPLEMENTAL INFORMATION No determination is made whether items meet minimum standards (Y/N, NA, NV, only)

INSULATION	Y/N	Type	Inches/Depth
85. Attic Insulation	<u>NV</u>	_____	_____
86. Foundation Insulation	<u>N</u>	_____	_____
87. Kneewall Insulation	<u>NV</u>	_____	_____
88. Rim Joist Insulation	<u>NA</u>	_____	_____

89. ADDITIONAL COMMENTS (81 through 88) _____

I hereby certify I prepared this report in compliance with the St. Paul Evaluator Guidelines and all other applicable policies and procedures of the Truth-in-Sale of Housing Board. I have utilized reasonable and ordinary care and diligence and I have noted all conditions found that do not conform to the minimum standards of maintenance.

Vicki Scheunemann

Evaluator Signature

651-646-0009

Phone Number

01/10/2007

Date

Page 4 of 4

Rev 1/2004

Printed Name: Vicki Scheunemann**IMPORTANT NOTICES**

1. Any single family residence in St. Paul must have at least one smoke detector connected to the electrical system (hard-wired). The detector must be located near sleeping rooms. For more information call Fire Prevention, (651) 228-6230. (St. Paul Legislative Code, Chapter 58.)
2. Rainleaders connected to the sanitary sewer system must be disconnected. For more information call Public Works, Sewer Division, (651) 266-6234.
3. Any house built before 1950 may have lead paint on/in it. If children eat lead paint, they can be poisoned. For more information call Ramsey County Public Health, (651) 292-6525.
4. Neither the City of St. Paul nor the Evaluator is responsible for the determination of the presence of airborne particles such as asbestos, noxious gases such as radon, or other conditions of air quality that may be present, nor the conditions which may cause the above.
5. If this building is used for any purpose other than a single family dwelling, it may be illegally zoned. To help you determine legal uses under the zoning ordinance, contact the Zoning Administrator at (651) 266-9008.
6. An automatic garage door should reverse upon striking an object. If it does not reverse it poses a serious hazard and should be immediately repaired or replaced.

39. Smoke detector Information:

Smoke detector(s) Y
 Properly located Y
 Hard-Wired Y

Disclosure Report

St. Paul Truth-In-Sale of Housing
 (Carefully read this entire report)

For Office Use, ONLY:

Date Received _____

Payment Ref: _____

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 245 Maria

Addresses without the correct street type and/or direction may be returned and may incur a late fee.

Owner's Name: Public Housing AgencyOwner's Address: 555 N Wabasha St #400, St. Paul, MN 55102

include City & State if NOT St. Paul, and ALL Zip codes, EVEN IN St. Paul

Type of Dwelling: Single Family X Townhouse _____ Condo* _____
 Duplex _____ Usage may not be legal. See below.

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

Comments: C/O Dave Lang**PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION**

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul. You may obtain a printout of all this information by visiting the LIEP website at: www.liep.us

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

- ☒ IS located within a St. Paul Heritage Preservation District or it is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation contact the Office of License, Inspections and Environmental Protection (LIEP) at 651. 266-9090.
- ☐ IS a Registered Vacant Building Vacant Buildings are regulated by Chapter 43 of the St. Paul Legislative Code. New owners must re-register the building and must comply with all existing Code Compliance Orders. Other regulation or restrictions regarding occupancy may apply. Contact the Vacant Buildings Division for specific information at 651. 266-1900.
- ☐ HAS Open permits. Completion and/or occupancy restrictions or requirements may apply. Contact LIEP at 651.266-9090.
- ☐ IS a Verified Legal Duplex. If this dwelling is in use is a duplex and this box is not checked, contact LIEP Zoning at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

RATING**KEY:****"M"** = Meets minimum standards - the item conforms to minimum standards of maintenance**"B"** = Below minimum standards - the item is below minimum standards**"C"** = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards**"H"** = Hazardous - the item in its present condition may endanger the health and safety of the occupantAny item marked **"B"**, **"C"**, or **"H"** must have a written comment about the item. Additional comment sheets may be attached if needed.**"Y"** = Yes **"N"** = No **"NV"** = Not Visible/Viewed**"NA"** = Not Applicable**This Report:**

- is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detector in single family residences.
- is based on the current Truth-in-Sale of Housing Evaluator Guidelines.
- is not warranted, by the City of St. Paul, or by the evaluator, for the condition of the building component, nor of the accuracy of this report.
- covers only the items listed on the form and only those items *visible at the time of the evaluation*. The Evaluator is not required to ignite the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
- may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
- is valid for one year from the date of issue and only for the owner named on this report.

Questions regarding this report should be directed to the evaluator.

Complaints regarding this report should be directed to Department of Neighborhood Housing and Property Improvement,
 Truth-in-Sale of Housing, 1600 White Bear Ave North, St. Paul, MN 55106, Phone No. (651) 266-1900.

EVALUATOR: Scott Scheunemann PHONE: 651-646-0009 DATE: 01/09/2007 Rev 1/2004

Address 245 MARIA

Date 01 / 09 / 2007

page 1 of 4

4

PHA 018472

Property Address: 245 Maria

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails B
 2. Basement/cellar floor B
 3. Foundation B,C
 4. Evidence of dampness or staining Y
 5. First floor, floor system M
 6. Beams and columns M

1. *B Ends of handrail are not returned to wall, low overhead*
 2. *B Cracked slab.*
 3. *B Spalling plaster.*
 3. *C Foundation is covered by plaster and not visible*
 4. *Previous stains on unfinished walls.*

ELECTRICAL SERVICE(S) # of Services . 1

7. Service size:

Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____Volts: 115 ____ 115/220 X**BASEMENT ONLY:**

8. Electrical service installation/grounding M
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) M
 11. Waste and vent piping (all floors) M
 12. Water piping (all floors) B
 13. Gas piping (all floors) B
 14. Water heater(s), installation M
 15. Water heater(s), venting B,H
 16. Plumbing fixtures (basement) M

12. *B No backflow prevention on exterior water faucets.*
 13. *B Lacking drip-T fitting for dryer.*
 15. *B Water heater is not visibly connected to a metal chimney liner*
 15. *H Vent is lacking clearance to combustible framing at masonry chimney*

HEATING SYSTEM(S) # of 1

17. Heating plant(s): Type: Water Fuel: Gas
 a. Installation and visible condition C,H
 b. Viewed in operation (required in heating season) Y
 c. Combustion venting M

- 17A *C Combustion chamber and internal components are not visible*
 17A *H No backflow preventer on boiler water supply (DCIVA-Check valve only).*

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: _____ Fuel: _____
 a. Installation and visible condition -
 b. Viewed in operation -
 c. Combustion venting -

19. ADDITIONAL COMMENTS (1 through 18) _____

EVALUATOR: Scott ScheunemannDATE: 01/09/2007Page 2 of 4
Rev 1/2004

PHA 018473

Property Address: 245 Maria

See Page 1 for Rating Key

Item #

Comments

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

KITCHEN

20. Walls and ceiling M
 21. Floor condition and ceiling height M
 22. Evidence of dampness or staining N
 23. Electrical outlets and fixtures M
 24. Plumbing fixtures M
 25. Water flow M
 26. Window size/openable area/mechanical exhaust M
 27. Condition of doors/windows/mech. exhaust ... M

LIVING AND DINING ROOM(S)

28. Walls and ceiling M
 29. Floor condition and ceiling height C
 30. Evidence of dampness or staining N
 31. Electrical outlets and fixtures H
 32. Window size and openable area M
 33. Window and door condition M

HALLWAYS, STAIRS AND ENTRIES

34. Walls, ceilings and floors M
 35. Evidence of dampness or staining N
 36. Stairs and handrails to upper floors B
 37. Electrical outlets and fixtures M
 38. Window and door condition M
 39. Smoke detector(s) Y
 Properly located Y
 Hard-wired Y

BATHROOM(S)

40. Walls and ceiling B
 41. Floor condition and ceiling height M
 42. Evidence of dampness or staining N
 43. Electrical outlets and fixtures M
 44. Plumbing fixtures M
 45. Water flow M
 46. Window size/openable area/mechanical exhaust M
 47. Condition of windows/doors/mech. exhaust ... M

SLEEPING ROOM(S)

48. Walls and ceiling M
 49. Floor condition, area, and ceiling height M
 50. Evidence of dampness or staining N
 51. Electrical outlets and fixtures C
 52. Window size and openable area M
 53. Window and door condition M

ENCLOSED PORCHES AND OTHER ROOMS

54. Walls and floor condition NA
 55. Evidence of dampness or staining NA
 56. Electrical outlets and fixtures NA
 57. Window and door condition NA

ATTIC SPACE (Visible Areas)

58. Roof boards and rafters C
 59. Evidence of dampness or staining ---
 60. Electrical wiring/outlets/fixtures ---
 61. Ventilation ---

62. ADDITIONAL COMMENTS (20 through 61) ---29. *C Floors are slightly out of level.*31. *H Extension cord wiring is used as permanent to florescent ceiling light near entry*36. *B Lacking grippable handrail by design*40. *B Loose tiles at tub.*51. *C Limited view due to stored items / furniture, can't fully evaluate.*58. *C Attic access is locked and not viewed*EVALUATOR: Scott ScheunemannDATE: 01/09/2007Page 3 of 4
Rev 1/2004

PHA 018474

Property Address: 245 Maria

See Page 1 for Rating Key

Item # Comments

EXTERIOR (Visible Areas)

63. Foundation	<u>B</u>
64. Basement/cellar windows	<u>M</u>
65. Drainage (grade)	<u>B</u>
66. Exterior walls	<u>M</u>
67. Doors (frames/storms/screens)	<u>M</u>
68. Windows (frames/storms/screens)	<u>M</u>
69. Open porches, stairways and decks	<u>B</u>
70. Cornice and trim	<u>M</u>
71. Roof structure and covering	<u>M</u>
72. Gutters and downspouts	<u>M</u>
73. Chimneys	<u>M</u>
74. Outlets, fixtures and service entrance	<u>M</u>

63. *B Missing / spalling mortar in block joints*
 65. *B Grading of soil lacks slope away from house in areas.*
 69. *B Worn decking finish and boards, guardrail is spaced over 4", spalling mortar at steps*

GARAGE(S)/ACCESSORY STRUCTURE(S)

75. Roof structure and covering	<u>C</u>
76. Wall structure and covering	-----
77. Slab condition	-----
78. Garage doors	-----
79. Garage opener- (see important notice #6)	-----
80. Electrical wiring, outlets and fixtures	-----
81. ADDITIONAL COMMENTS (62 through 80)	-----

75. *C No garage.***FIREPLACE/WOODSTOVES # of 0**

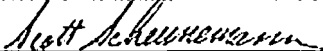
82. Dampers installed in fireplaces	-----
83. Installation	-----
84. Condition	-----

SUPPLEMENTAL INFORMATION No determination is made whether items meet minimum standards (Y/N, NA, NV, only)

INSULATION	Y/N	Type	Inches/Depth
85. Attic Insulation	<u>NV</u>	-----	-----
86. Foundation Insulation	<u>N</u>	-----	-----
87. Kneewall Insulation	<u>NV</u>	-----	-----
88. Rim Joist Insulation	<u>N</u>	-----	-----

89. ADDITIONAL COMMENTS (81 through 88) -----

I hereby certify I prepared this report in compliance with the St. Paul Evaluator Guidelines and all other applicable policies and procedures of the Truth-in-Sale of Housing Board. I have utilized reasonable and ordinary care and diligence and I have noted all conditions found that do not conform to the minimum standards of maintenance.



Evaluator Signature

651-646-0009

Phone Number

01/09/2007

Date

Page 4 of 4

Rev 1/2004

Printed Name: Scott Scheunemann**IMPORTANT NOTICES**

- Any single family residence in St. Paul must have at least one smoke detector connected to the electrical system (hard-wired). The detector must be located near sleeping rooms. For more information call Fire Prevention, (651) 228-6230. (St. Paul Legislative Code, Chapter 58.)
- Rainleaders connected to the sanitary sewer system must be disconnected. For more information call Public Works, Sewer Division, (651) 266-6234.
- Any house built before 1950 may have lead paint on/in it. If children eat lead paint, they can be poisoned. For more information call Ramsey County Public Health, (651) 292-6525.
- Neither the City of St. Paul nor the Evaluator is responsible for the determination of the presence of airborne particles such as asbestos, noxious gases such as radon, or other conditions of air quality that may be present, nor the conditions which may cause the above.
- If this building is used for any purpose other than a single family dwelling, it may be illegally zoned. To help you determine legal uses under the zoning ordinance, contact the Zoning Administrator at (651) 266-9008.
- An automatic garage door should reverse upon striking an object. If it does not reverse it poses a serious hazard and should be immediately repaired or replaced.

PHA 018475

39. Smoke detector Information:

Smoke detector(s) Y
 Properly located Y
 Hard-Wired Y

Disclosure Report

St. Paul Truth-In-Sale of Housing
 (Carefully read this entire report)

For Office Use, ONLY:

Date Received _____

Payment Ref: _____

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 1115 Rose E
Addresses without the correct street type and/or direction may be returned and may incur a late fee.

Owner's Name: Public Housing Agency

Owner's Address: 555 N Wabasha St #400, St. Paul, MN 55102
include City & State if NOT St. Paul, and ALL Zip codes, EVEN IN St. Paul

Type of Dwelling: Single Family X Townhouse _____ Condo* _____
 Duplex _____ Usage may not be legal. See below.

Comments: C/O Dave Lang

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul. You may obtain a printout of all this information by visiting the LIEP website at: www.liep.us

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

- ☐ IS located within a St. Paul Heritage Preservation District or it is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation contact the Office of License, Inspections and Environmental Protection (LIEP) at 651.266-9090.
- ☐ IS a Registered Vacant Building. Vacant Buildings are regulated by Chapter 43 of the St. Paul Legislative Code. New owners must re-register the building and must comply with all existing Code Compliance Orders. Other regulation or restrictions regarding occupancy may apply. Contact the Vacant Buildings Division for specific information at 651.266-1900.
- ☐ HAS Open permits. Completion and/or occupancy restrictions or requirements may apply. Contact LIEP at 651.266-9090.
- ☐ IS a Verified Legal Duplex. If this dwelling is in use is a duplex and this box is not checked, contact LIEP Zoning at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

RATING**KEY:**

"M" = Meets minimum standards - the item conforms to minimum standards of maintenance

"B" = Below minimum standards - the item is below minimum standards

"C" = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards

"H" = Hazardous - the item in its present condition may endanger the health and safety of the occupant

Any item marked "B", "C", or "H" must have a written comment about the item. Additional comment sheets may be attached if needed.

"Y" = Yes "N" = No "NV" = Not Visible/Viewed "NA" = Not Applicable

This Report:

- is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detector in single family residences.
- is based on the current Truth-in-Sale of Housing Evaluator Guidelines.
- is not warranted, by the City of St. Paul, or by the evaluator, for the condition of the building component, nor of the accuracy of this report.
- covers only the items listed on the form and only those items *visible at the time of the evaluation*. The Evaluator is not required to ignite the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
- may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
- is valid for one year from the date of issue and only for the owner named on this report.

Questions regarding this report should be directed to the evaluator.

Complaints regarding this report should be directed to Department of Neighborhood Housing and Property Improvement, Truth-In-Sale of Housing, 1600 White Bear Ave North, St. Paul, MN 55106, Phone No. (651) 266-1900.

EVALUATOR: Scott Scheunemann PHONE: 651-646-0009 DATE: 01/09/2007 Rev 1/2004

Address 1115 ROSE E

Date 01/09/2007

Page 1 of 4

4

PHA 018476

Property Address: 1115 Rose E

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails B
 2. Basement/cellar floor M
 3. Foundation C
 4. Evidence of dampness or staining Y
 5. First floor, floor system M
 6. Beams and columns M

1. *B Ends of handrail are not returned to wall, Low headroom, lacking returned ends for handrail*
 3. *C 3-4-5-6- Areas covered/finished off, can not fully view.*
 4. *Previous stains on base of walls.*

ELECTRICAL SERVICE(S) # of Services . 1

7. Service size:

Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____Volts: 115 ____ 115/220 X**BASEMENT ONLY:**

8. Electrical service installation/grounding M
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) M
 11. Waste and vent piping (all floors) M
 12. Water piping (all floors) B
 13. Gas piping (all floors) B
 14. Water heater(s), installation M
 15. Water heater(s), venting B,H
 16. Plumbing fixtures (basement) B

12. *B No backflow prevention on exterior water faucets.*
 13. *B Obsolete gas valve installed for water heater*
 15. *B Water heater is not visibly connected to a metal chimney liner*
 15. *H Vent is lacking clearance to combustible framing.*
 16. *B Unvented sink and shower in basement*

HEATING SYSTEM(S) # of 1

17. Heating plant(s): Type: Air Fuel: Gas
 a. Installation and visible condition C,B
 b. Viewed in operation (required in heating season) ... Y
 c. Combustion venting B

- 17A *B A/C condensation drains into pipe at slab*
 17A *C Heat exchanger and interior components are not visible.*
 17C *B Rust on components, Thermal vent damper is installed on furnace exhaust vent*

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: _____ Fuel: _____
 a. Installation and visible condition -
 b. Viewed in operation -
 c. Combustion venting -

19. ADDITIONAL COMMENTS (1 through 18) -EVALUATOR: Scott ScheunemannDATE: 01/09/2007Page 2 of 4
Rev 1/2004

PHA 018477

Property Address: 1115 Rose ESee Page 1 for Rating Key **Item #** **Comments**

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

KITCHEN

20. Walls and ceiling	<u>M</u>
21. Floor condition and ceiling height	<u>M</u>
22. Evidence of dampness or staining	<u>N</u>
23. Electrical outlets and fixtures	<u>M</u>
24. Plumbing fixtures	<u>B</u>
25. Water flow	<u>M</u>
26. Window size/openable area/mechanical exhaust	<u>M</u>
27. Condition of doors/windows/mech. exhaust	<u>M</u>

24. *B Corrosion on wasteline, sink is not vented.***LIVING AND DINING ROOM(S)**

28. Walls and ceiling	<u>M</u>
29. Floor condition and ceiling height	<u>M</u>
30. Evidence of dampness or staining	<u>N</u>
31. Electrical outlets and fixtures	<u>M</u>
32. Window size and openable area	<u>M</u>
33. Window and door condition	<u>M</u>

HALLWAYS, STAIRS AND ENTRIES

34. Walls, ceilings and floors	<u>B</u>
35. Evidence of dampness or staining	<u>N</u>
36. Stairs and handrails to upper floors	<u>B</u>
37. Electrical outlets and fixtures	<u>B</u>
38. Window and door condition	<u>M</u>
39. Smoke detector(s)	<u>Y</u>
Properly located	<u>Y</u>
Hard-wired	<u>Y</u>

34. *B Low headroom, Random plaster cracks.*36. *B Low guardrail at ledge*37. *B Outlet is wired with reverse polarity at top of steps***BATHROOM(S)**

40. Walls and ceiling	<u>M</u>
41. Floor condition and ceiling height	<u>M</u>
42. Evidence of dampness or staining	<u>N</u>
43. Electrical outlets and fixtures	<u>M</u>
44. Plumbing fixtures	<u>M</u>
45. Water flow	<u>M</u>
46. Window size/openable area/mechanical exhaust	<u>M</u>
47. Condition of windows/doors/mech. exhaust	<u>M</u>

SLEEPING ROOM(S)

48. Walls and ceiling	<u>M</u>
49. Floor condition, area, and ceiling height	<u>M</u>
50. Evidence of dampness or staining	<u>N</u>
51. Electrical outlets and fixtures	<u>M</u>
52. Window size and openable area	<u>M</u>
53. Window and door condition	<u>M</u>

ENCLOSED PORCHES AND OTHER ROOMS

54. Walls and floor condition	<u>NA</u>
55. Evidence of dampness or staining	<u>NA</u>
56. Electrical outlets and fixtures	<u>NA</u>
57. Window and door condition	<u>NA</u>

ATTIC SPACE (Visible Areas)

58. Roof boards and rafters	<u>C</u>
59. Evidence of dampness or staining	<u>Y</u>
60. Electrical wiring/outlets/fixtures	<u>M</u>
61. Ventilation	<u>M</u>

58. *C Limited view of attic from access.*62. **ADDITIONAL COMMENTS (20 through 61)** _____EVALUATOR: Scott ScheunemannDATE: 01/09/2007Page 3 of 4
Rev 1/2004

PHA 018478

Property Address: 1115 Rose E

See Page 1 for Rating Key

Item # Comments

EXTERIOR (Visible Areas)

63. Foundation	<u>M</u>
64. Basement/cellar windows	<u>M</u>
65. Drainage (grade)	<u>B</u>
66. Exterior walls	<u>M</u>
67. Doors (frames/storms/screens)	<u>M</u>
68. Windows (frames/storms/screens)	<u>M</u>
69. Open porches, stairways and decks	<u>M</u>
70. Cornice and trim	<u>M</u>
71. Roof structure and covering	<u>M</u>
72. Gutters and downspouts	<u>M</u>
73. Chimneys	<u>M</u>
74. Outlets, fixtures and service entrance	<u>M</u>

65. B Grading of soil lacks slope away from house in areas.

GARAGE(S)/ACCESSORY STRUCTURE(S)

75. Roof structure and covering	<u>M</u>
76. Wall structure and covering	<u>M</u>
77. Slab condition	<u>C</u>
78. Garage doors	<u>M</u>
79. Garage opener- (see important notice #6)	<u>N</u>
80. Electrical wiring, outlets and fixtures	<u>B</u>
81. ADDITIONAL COMMENTS (62 through 80)	-----

77. C Slab cracks. Limited view due to stored goods/car

80. B Outlet is wired with reversed polarity.

FIREPLACE/WOODSTOVES # of

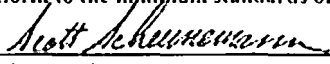
82. Dampers installed in fireplaces	-----
83. Installation	-----
84. Condition	-----

SUPPLEMENTAL INFORMATION No determination is made whether items meet minimum standards (Y/N, NA, NV, only)

INSULATION	Y/N	Type	Inches/Depth
85. Attic Insulation	<u>Y</u>	<u>Cellulose</u>	<u>10</u>
86. Foundation Insulation	<u>N</u>	-----	-----
87. Kneewall Insulation	<u>NA</u>	-----	-----
88. Rim Joist Insulation	<u>NA</u>	-----	-----

89. ADDITIONAL COMMENTS (81 through 88) -----

I hereby certify I prepared this report in compliance with the St. Paul Evaluator Guidelines and all other applicable policies and procedures of the Truth-in-Sale of Housing Board. I have utilized reasonable and ordinary care and diligence and I have noted all conditions found that do not conform to the minimum standards of maintenance.



Evaluator Signature

651-646-0009

Phone Number

01/09/2007

Date

Page 4 of 4

Rev 1/2004

Printed Name: Scott Scheunemann**IMPORTANT NOTICES**

- Any single family residence in St. Paul must have at least one smoke detector connected to the electrical system (hard-wired). The detector must be located near sleeping rooms. For more information call Fire Prevention, (651) 228-6230. (St. Paul Legislative Code, Chapter 58.)
- Rainleaders connected to the sanitary sewer system must be disconnected. For more information call Public Works, Sewer Division, (651) 266-6234.
- Any house built before 1950 may have lead paint on/in it. If children eat lead paint, they can be poisoned. For more information call Ramsey County Public Health, (651) 292-6525.
- Neither the City of St. Paul nor the Evaluator is responsible for the determination of the presence of airborne particles such as asbestos, noxious gases such as radon, or other conditions of air quality that may be present, nor the conditions which may cause the above.
- If this building is used for any purpose other than a single family dwelling, it may be illegally zoned. To help you determine legal uses under the zoning ordinance, contact the Zoning Administrator at (651) 266-9008.
- An automatic garage door should reverse upon striking an object. If it does not reverse it poses a serious hazard and should be immediately repaired or replaced.

9. Smoke detector Information:

Smoke detector(s) Y
 Properly located Y
 Hard-Wired Y

Disclosure Report

St. Paul Truth-In-Sale of Housing
 (Carefully read this entire report)

For Office Use, ONLY:

Date Received _____

Payment Ref: _____

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 1720 Selby Ave

Addresses without the correct street type and/or direction may be returned and may incur a late fee

Owner's Name: Public Housing Agency, City of St PaulOwner's Address: 261 University Ave E, St. Paul, MN 55103

include City & State if NOT St Paul, and ALL Zip codes, EVEN IN St Paul

Type of Dwelling: Single Family X Townhouse _____ Condo* _____
 Duplex _____ Usage may not be legal. See below.

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

Comments:

PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul. You may obtain a printout of all this information by visiting the LIEP website at: www.liep.us

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

- ☐ IS located within a St. Paul Heritage Preservation District or it is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation contact the Office of License, Inspections and Environmental Protection (LIEP) at 651. 266-9090.
- ☐ IS a Registered Vacant Building. Vacant Buildings are regulated by Chapter 43 of the St. Paul Legislative Code. New owners must re-register the building and must comply with all existing Code Compliance Orders. Other regulation or restrictions regarding occupancy may apply. Contact the Vacant Buildings Division for specific information at 651. 266-1900.
- ☐ HAS Open permits. Completion and/or occupancy restrictions or requirements may apply. Contact LIEP at 651.266-9090.
- ☐ IS a Verified Legal Duplex. If this dwelling is in use is a duplex and this box is not checked, contact LIEP Zoning at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

RATING

KEY:

"M" = Meets minimum standards - the item conforms to minimum standards of maintenance

"B" = Below minimum standards - the item is below minimum standards

"C" = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards

"H" = Hazardous - the item in its present condition may endanger the health and safety of the occupant

Any item marked "B", "C", or "H" must have a written comment about the item. Additional comment sheets may be attached if needed.

"Y" = Yes "N" = No "NV" = Not Visible/Viewed "NA" = Not Applicable

This Report:

- is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detector in single family residences.
- is based on the current Truth-in-Sale of Housing Evaluator Guidelines.
- is not warranted, by the City of St. Paul, or by the evaluator, for the condition of the building component, nor of the accuracy of this report
- covers only the items listed on the form and only those items *visible at the time of the evaluation*. The Evaluator is not required to ignite the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas
- may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
- is valid for one year from the date of issue and only for the owner named on this report

Questions regarding this report should be directed to the evaluator.

Complaints regarding this report should be directed to Department of Neighborhood Housing and Property Improvement, Truth-in-Sale of Housing, 1600 White Bear Ave North, St. Paul, MN 55106, Phone No. (651) 266-1900.

EVALUATOR: Vicki Scheunemann PHONE: 651-646-0009 DATE: 01/09/2007 Rev 1/2004

Address 1720 SELBY AVE

Date 01 / 09 / 2007

Page 1 of 4

4

PHA 018480

Property Address: 1720 Selby Ave

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails B
 2. Basement/cellar floor M
 3. Foundation B
 4. Evidence of dampness or staining N
 5. First floor, floor system M
 6. Beams and columns M

1. *B Low headroom (less than 6' 8")*3. *B Spalling plaster***ELECTRICAL SERVICE(S)** # of Services . 1

7. Service size:

Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____Volts: 115 ____ 115/220 X8. *H No electrical grounding loop at water meter.***BASEMENT ONLY:**

8. Electrical service installation/grounding H
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) M
 11. Waste and vent piping (all floors) M
 12. Water piping (all floors) M
 13. Gas piping (all floors) M
 14. Water heater(s), installation M
 15. Water heater(s), venting M
 16. Plumbing fixtures (basement) M

HEATING SYSTEM(S) # of 117. Heating plant(s): Type: Air Fuel: Gas

- a. Installation and visible condition M
 b. Viewed in operation (required in heating season) ... Y
 c. Combustion venting M

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: _____ Fuel: _____

- a. Installation and visible condition -
 b. Viewed in operation -
 c. Combustion venting -

19. ADDITIONAL COMMENTS (1 through 18) -EVALUATOR: Vicki ScheunemannDATE: 01/09/2007Page 2 of 4
Rev 1/2004

PHA 018481

Property Address: 1720 Selby AveSee Page 1 for Rating Key **Item #** **Comments**

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

KITCHEN

20. Walls and ceiling	<u>M</u>	23. <i>H Some ungrounded three prong outlets</i>
21. Floor condition and ceiling height	<u>M</u>	
22. Evidence of dampness or staining	<u>N</u>	
23. Electrical outlets and fixtures	<u>H</u>	
24. Plumbing fixtures	<u>M</u>	
25. Water flow	<u>M</u>	
26. Window size/openable area/mechanical exhaust	<u>M</u>	
27. Condition of doors/windows/mech. exhaust ...	<u>M</u>	

LIVING AND DINING ROOM(S)

28. Walls and ceiling	<u>M</u>	31. <i>H Ungrounded 3-prong outlets.</i>
29. Floor condition and ceiling height	<u>M</u>	
30. Evidence of dampness or staining	<u>N</u>	
31. Electrical outlets and fixtures	<u>H</u>	
32. Window size and openable area	<u>M</u>	
33. Window and door condition	<u>M</u>	

HALLWAYS, STAIRS AND ENTRIES

34. Walls, ceilings and floors	<u>M</u>
35. Evidence of dampness or staining	<u>N</u>
36. Stairs and handrails to upper floors	<u>M</u>
37. Electrical outlets and fixtures	<u>M</u>
38. Window and door condition	<u>M</u>
39. Smoke detector(s)	<u>Y</u>
Properly located	<u>Y</u>
Hard-wired	<u>Y</u>

BATHROOM(S)

40. Walls and ceiling	<u>M</u>	42. <i>Stains evident.</i>
41. Floor condition and ceiling height	<u>M</u>	43. <i>H One bathroom outlet not ground fault protected.</i>
42. Evidence of dampness or staining	<u>Y</u>	
43. Electrical outlets and fixtures	<u>H</u>	
44. Plumbing fixtures	<u>M</u>	
45. Water flow	<u>M</u>	
46. Window size/openable area/mechanical exhaust	<u>M</u>	
47. Condition of windows/doors/mech. exhaust ..	<u>M</u>	

SLEEPING ROOM(S)

48. Walls and ceiling	<u>M</u>
49. Floor condition, area, and ceiling height	<u>M</u>
50. Evidence of dampness or staining	<u>N</u>
51. Electrical outlets and fixtures	<u>M</u>
52. Window size and openable area	<u>M</u>
53. Window and door condition	<u>M</u>

ENCLOSED PORCHES AND OTHER ROOMS

54. Walls and floor condition	_____
55. Evidence of dampness or staining	_____
56. Electrical outlets and fixtures	_____
57. Window and door condition	_____

ATTIC SPACE (Visible Areas)

58. Roof boards and rafters	<u>M</u>
59. Evidence of dampness or staining	<u>N</u>
60. Electrical wiring/outlets/fixtures	<u>M</u>
61. Ventilation	<u>M</u>

62. **ADDITIONAL COMMENTS (20 through 61)** _____EVALUATOR: Vicki ScheunemannDATE: 01/09/2007Page 3 of 4
Rev 1/2004

See Page 1 for Rating Key

	Item #	Comments
EXTERIOR (Visible Areas)		
63. Foundation	<u>M</u>	65. B Grade is low / flat in areas.
64. Basement/cellar windows	<u>M</u>	66. B Corner dented/damaged
65. Drainage (grade)	<u>B</u>	
66. Exterior walls	<u>B</u>	
67. Doors (frames/storms/screens)	<u>M</u>	
68. Windows (frames/storms/screens)	<u>M</u>	
69. Open porches, stairways and decks	<u>M</u>	
70. Cornice and trim	<u>M</u>	
71. Roof structure and covering	<u>M</u>	
72. Gutters and downspouts	<u>M</u>	
73. Chimneys	<u>M</u>	
74. Outlets, fixtures and service entrance	<u>M</u>	

GARAGE(S)/ACCESSORY STRUCTURE(S)

75. Roof structure and covering	_____
76. Wall structure and covering	_____
77. Slab condition	_____
78. Garage doors	_____
79. Garage opener- (see important notice #6)	_____
80. Electrical wiring, outlets and fixtures	_____
81. ADDITIONAL COMMENTS (62 through 80) _____	

FIREPLACE/WOODSTOVES # of 0

82. Dampers installed in fireplaces	_____
83. Installation	_____
84. Condition	_____

SUPPLEMENTAL INFORMATION No determination is made whether items meet minimum standards (Y/N, NA, NV, only)

INSULATION	Y/N	Type	Inches/Depth
85. Attic Insulation	<u>NV</u>	_____	_____
86. Foundation Insulation	<u>N</u>	_____	_____
87. Kneewall Insulation	<u>NA</u>	_____	_____
88. Rim Joist Insulation	<u>NA</u>	_____	_____

89. ADDITIONAL COMMENTS (81 through 88) _____

I hereby certify I prepared this report in compliance with the St. Paul Evaluator Guidelines and all other applicable policies and procedures of the Truth-in-Sale of Housing Board. I have utilized reasonable and ordinary care and diligence and I have noted all conditions found that do not conform to the minimum standards of maintenance.

Vicki Scheunemann

Evaluator Signature

651-646-0009

Phone Number

01/09/2007

Date

Page 4 of 4

Rev 1/2004

Printed Name: Vicki Scheunemann

IMPORTANT NOTICES

- Any single family residence in St. Paul must have at least one smoke detector connected to the electrical system (hard-wired). The detector must be located near sleeping rooms. For more information call Fire Prevention, (651) 228-6230. (St. Paul Legislative Code, Chapter 58.)
- Rainleaders connected to the sanitary sewer system must be disconnected. For more information call Public Works, Sewer Division, (651) 266-6234.
- Any house built before 1950 may have lead paint on/in it. If children eat lead paint, they can be poisoned. For more information call Ramsey County Public Health, (651) 292-6525.
- Neither the City of St. Paul nor the Evaluator is responsible for the determination of the presence of airborne particles such as asbestos, noxious gases such as radon, or other conditions of air quality that may be present, nor the conditions which may cause the above.
- If this building is used for any purpose other than a single family dwelling, it may be illegally zoned. To help you determine legal uses under the zoning ordinance, contact the Zoning Administrator at (651) 266-9008.
- An automatic garage door should reverse upon striking an object. If it does not reverse it poses a serious hazard and should be immediately repaired or replaced.

39. Smoke detector Information:

Smoke detector(s) Y
 Properly located Y
 Hard-Wired Y

Disclosure Report

St. Paul Truth-In-Sale of Housing
 (Carefully read this entire report)

For Office Use, ONLY:

Date Received _____

Payment Ref: _____

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 325 Arbor St
Addresses without the correct street type and/or direction may be returned and may incur a late fee.

Owner's Name: Public Housing Agency, City of St Paul

Owner's Address: 261 University Ave E, St. Paul, MN 55103
include City & State if NOT St. Paul, and ALL Zip codes, EVEN IN St Paul

Type of Dwelling: Single Family X Townhouse _____ Condo* _____
 Duplex _____ Usage may not be legal. See below.

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

Comments:

PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul. You may obtain a printout of all this information by visiting the LIEP website at: www.liep.us

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

- ☐ IS located within a St. Paul Heritage Preservation District or it is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation contact the Office of License, Inspections and Environmental Protection (LIEP) at 651.266-9090.
- ☐ IS a Registered Vacant Building. Vacant Buildings are regulated by Chapter 43 of the St. Paul Legislative Code. New owners must re-register the building and must comply with all existing Code Compliance Orders. Other regulation or restrictions regarding occupancy may apply. Contact the Vacant Buildings Division for specific information at 651.266-1900.
- ☐ HAS Open permits. Completion and/or occupancy restrictions or requirements may apply. Contact LIEP at 651.266-9090.
- ☐ IS a Verified Legal Duplex. If this dwelling is in use is a duplex and this box is not checked, contact LIEP Zoning at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

RATING**KEY:**

"M" = Meets minimum standards - the item conforms to minimum standards of maintenance
 "B" = Below minimum standards - the item is below minimum standards
 "C" = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards
 "H" = Hazardous - the item in its present condition may endanger the health and safety of the occupant
 Any item marked "B", "C", or "H" must have a written comment about the item. Additional comment sheets may be attached if needed.
 "Y" = Yes "N" = No "NV" = Not Visible/Viewed "NA" = Not Applicable

This Report:

- is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code, however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detector in single family residences.
- is based on the current Truth-in-Sale of Housing Evaluator Guidelines
- is not warranted, by the City of St. Paul, or by the evaluator, for the condition of the building component, nor of the accuracy of this report
- covers only the items listed on the form and only those items *visible at the time of the evaluation*. The Evaluator is not required to ignite the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas
- may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
- is valid for one year from the date of issue and only for the owner named on this report.

Questions regarding this report should be directed to the evaluator.

Complaints regarding this report should be directed to Department of Neighborhood Housing and Property Improvement, Truth-In-Sale of Housing, 1600 White Bear Ave North, St. Paul, MN 55106, Phone No. (651) 266-1900.

EVALUATOR: Vicki Scheunemann PHONE: 651-646-0009 DATE: 01/11/2007 Rev 1/2004

Address 325 ARBOR STDate 01 / 11 / 2007

page 1 of

4

PHA 018484

Property Address: 325 Arbor St

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails M
 2. Basement/cellar floor M
 3. Foundation C
 4. Evidence of dampness or staining Y
 5. First floor, floor system M
 6. Beams and columns M

3. C 3,4,5,6 Areas concealed - can't view to evaluate.

4. Stains on walls, floor

ELECTRICAL SERVICE(S) # of Services . 1

7. Service size:

Amps: 30 ____ 60 ____ 100 X 150 ____ Other ____Volts: 115 ____ 115/220 X

8. H Service ground is connected to street side of water meter only. No electrical grounding loop at water meter.

BASEMENT ONLY:

8. Electrical service installation/grounding H
 9. Electrical wiring, outlets and fixtures M

PLUMBING SYSTEM

10. Floor drain(s) (basement) M
 11. Waste and vent piping (all floors) M
 12. Water piping (all floors) M
 13. Gas piping (all floors) B
 14. Water heater(s), installation M
 15. Water heater(s), venting M
 16. Plumbing fixtures (basement) M

13. B White plastic used as dryer vent Lacking drip-T fitting for dryer.

HEATING SYSTEM(S) # of 1

17. Heating plant(s): Type: Air Fuel: Gas
 a. Installation and visible condition M
 b. Viewed in operation (required in heating season) ... Y
 c. Combustion venting M

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: _____ Fuel: _____
 a. Installation and visible condition -
 b. Viewed in operation -
 c. Combustion venting -

19. ADDITIONAL COMMENTS (1 through 18) -EVALUATOR: Vicki Scheunemann DATE: 01/11/2007Page 2 of 4
Rev 1/2004

PHA 018485

See Page 1 for Rating Key Item # Comments

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

KITCHEN

20. Walls and ceiling	<u>M</u>
21. Floor condition and ceiling height	<u>M</u>
22. Evidence of dampness or staining	<u>N</u>
23. Electrical outlets and fixtures	<u>M</u>
24. Plumbing fixtures	<u>M</u>
25. Water flow	<u>M</u>
26. Window size/openable area/mechanical exhaust	<u>M</u>
27. Condition of doors/windows/mech. exhaust ...	<u>M</u>

LIVING AND DINING ROOM(S)

28. Walls and ceiling	<u>M</u>
29. Floor condition and ceiling height	<u>M</u>
30. Evidence of dampness or staining	<u>N</u>
31. Electrical outlets and fixtures	<u>M</u>
32. Window size and openable area	<u>M</u>
33. Window and door condition	<u>M</u>

HALLWAYS, STAIRS AND ENTRIES

34. Walls, ceilings and floors	<u>M</u>
35. Evidence of dampness or staining	<u>N</u>
36. Stairs and handrails to upper floors	<u>M</u>
37. Electrical outlets and fixtures	<u>M</u>
38. Window and door condition	<u>M</u>
39. Smoke detector(s)	<u>Y</u>
Properly located	<u>Y</u>
Hard-wired	<u>Y</u>

BATHROOM(S)

40. Walls and ceiling	<u>M</u>
41. Floor condition and ceiling height	<u>M</u>
42. Evidence of dampness or staining	<u>N</u>
43. Electrical outlets and fixtures	<u>M</u>
44. Plumbing fixtures	<u>M</u>
45. Water flow	<u>M</u>
46. Window size/openable area/mechanical exhaust	<u>M</u>
47. Condition of windows/doors/mech. exhaust ..	<u>M</u>

SLEEPING ROOM(S)

48. Walls and ceiling	<u>M</u>
49. Floor condition, area, and ceiling height	<u>M</u>
50. Evidence of dampness or staining	<u>N</u>
51. Electrical outlets and fixtures	<u>B</u>
52. Window size and openable area	<u>M</u>
53. Window and door condition	<u>M</u>

51. B Some ungrounded 3 prong outlets

ENCLOSED PORCHES AND OTHER ROOMS

54. Walls and floor condition	_____
55. Evidence of dampness or staining	_____
56. Electrical outlets and fixtures	_____
57. Window and door condition	_____

ATTIC SPACE (Visible Areas)

58. Roof boards and rafters	<u>C</u>
59. Evidence of dampness or staining	_____
60. Electrical wiring/outlets/fixtures	_____
61. Ventilation	_____

58. C No visible attic areas.

62. ADDITIONAL COMMENTS (20 through 61) _____

EVALUATOR: Vicki Scheunemann DATE: 01/11/2007

Page 3 of 4
 Rev 1/2004

PHA 018486

See Page 1 for Rating Key Item # Comments

★ **EXTERIOR (Visible Areas)**

63. Foundation	<u>M</u>
64. Basement/cellar windows	<u>M</u>
65. Drainage (grade)	<u>M</u>
66. Exterior walls	<u>M</u>
67. Doors (frames/storms/screens)	<u>M</u>
68. Windows (frames/storms/screens)	<u>M</u>
69. Open porches, stairways and decks	<u>M</u>
70. Cornice and trim	<u>M</u>
71. Roof structure and covering	<u>M</u>
72. Gutters and downspouts	<u>M</u>
73. Chimneys	<u>M</u>
74. Outlets, fixtures and service entrance	<u>M</u>

GARAGE(S)/ACCESSORY STRUCTURE(S)

75. Roof structure and covering	<u>M</u>
76. Wall structure and covering	<u>B</u>
77. Slab condition	<u>C</u>
78. Garage doors	<u>M</u>
79. Garage opener- (see important notice #6)	
80. Electrical wiring, outlets and fixtures	
81. ADDITIONAL COMMENTS (62 through 80)	

76. B Worn finish
77. C Viewed from outside only

FIREPLACE/WOODSTOVES # of 0

82. Dampers installed in fireplaces	
83. Installation	
84. Condition	

SUPPLEMENTAL INFORMATION No determination is made whether items meet minimum standards (Y/N, NA, NV, only)

INSULATION	Y/N	Type	Inches/Depth
85. Attic Insulation	<u>NV</u>		
86. Foundation Insulation	<u>NV</u>		
87. Kneewall Insulation	<u>NV</u>		
88. Rim Joist Insulation	<u>NV</u>		

89. ADDITIONAL COMMENTS (81 through 88) _____

I hereby certify I prepared this report in compliance with the St. Paul Evaluator Guidelines and all other applicable policies and procedures of the Truth-in-Sale of Housing Board. I have utilized reasonable and ordinary care and diligence and I have noted all conditions found that do not conform to the minimum standards of maintenance.

Vicki Scheunemann

651-646-0009

01/11/2007

Page 4 of 4

Evaluator Signature

Phone Number

Date

Rev 1/2004

Printed Name: Vicki Scheunemann

IMPORTANT NOTICES

1. Any single family residence in St. Paul must have at least one smoke detector connected to the electrical system (hard-wired). The detector must be located near sleeping rooms. For more information call Fire Prevention, (651) 228-6230. (St. Paul Legislative Code, Chapter 58.)
2. Rainleaders connected to the sanitary sewer system must be disconnected. For more information call Public Works, Sewer Division, (651) 266-6234.
3. Any house built before 1950 may have lead paint on/in it. If children eat lead paint, they can be poisoned. For more information call Ramsey County Public Health, (651) 292-6525.
4. Neither the City of St. Paul nor the Evaluator is responsible for the determination of the presence of airborne particles such as asbestos, noxious gases such as radon, or other conditions of air quality that may be present, nor the conditions which may cause the above.
5. If this building is used for any purpose other than a single family dwelling, it may be illegally zoned. To help you determine legal uses under the zoning ordinance, contact the Zoning Administrator at (651) 266-9008.
6. An automatic garage door should reverse upon striking an object. If it does not reverse it poses a serious hazard and should be immediately repaired or replaced.